

06/29/01

JC985 U.S. PTO

02-02-01

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>	Attorney Docket No.:	CM03553J
	First Inventor:	CHARLES B. SWOPE
	Title:	SELF-EXTRACTING RE-CONFIGURABLE INTERFACE USED IN MODULAR ELECTRONIC ARCHITECTURE
	Express Mail Label No.:	EL186923152US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

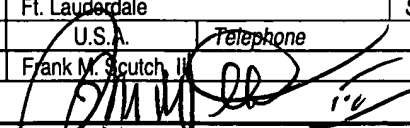
<b>APPLICATION ELEMENTS</b> (see MPEP chapter 600 concerning utility patent application contents)	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
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<p>1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form in duplicate</b> (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> <b>Specification</b> <b>Total Pages</b> <input type="text" value="9"/> (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&amp;D -Reference to sequence listing, a table, -Background of the invention -Brief Summary of the invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> <b>Drawing(s)</b> <b>Total Sheets</b> <input type="text" value="1"/></p> <p>5. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identify of above copies</p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent</p> <p>17. <input type="checkbox"/> Other: _____</p>
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18. **IF A CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in- Part (CIP)	Prior Appl. No. <input type="text"/>
Prior Appl. information:		Examiner: <input type="text"/>	Group/Art Unit: <input type="text"/>

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<input type="text" value="24273"/>	or	<input type="checkbox"/> Correspondence address below
Name	Frank M. Scutch, III		
	Motorola, Inc. - Law Department		
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Name	Frank M. Scutch, III	Registration No.	34,484
SIGNATURE			Date
			June 29, 2001

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FEE TRANSMITTAL		Complete if Known	
		Application Number	
		Filing Date	
		First Named Inventor	CHARLES B. SWOPE
		Examiner Name	
Patent fees are subject to annual revision		Group Art Unit	
TOTAL AMOUNT OF PAYMENT (\$)		750.00	Attorney Docket No. CM03553J
METHOD OF PAYMENT		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number 50-0757 Deposit Account Name Motorola, Inc.  <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES	
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other		Large Entity Fee Code Fee (\$) Small Entity Fee Code Fee (\$) Fee Description	
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity Fee Code Fee (\$) Small Entity Fee Code Fee (\$) Fee Paid			
101 710 201 365 Utility filing fee \$ 710.00			
106 320 206 160 Design filing fee			
107 490 207 245 Plant filing fee			
108 710 208 355 Reissue filing fee			
114 150 214 75 Provisional filing fee			
SUBTOTAL (1) (\$)			
2. EXTRA CLAIM FEES			
Total Claims 16 -20** = 0 X 18 = 0 Independent Claims 3 -3** = 0 X 80 = 0 Multiple Dependent Claims 270 = 0			
Large Entity Fee Code Fee (\$) Small Entity Fee Code Fee (\$) Fee Description			
103 18 203 9 Claims in excess of 20			
102 80 202 40 Independent claims in excess of 3			
104 270 204 135 Multiple dependent claim, if not paid			
109 80 209 40 ** Reissue independent claims Over original patent			
110 18 210 9 **Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)			
**OR NUMBER PREVIOUSLY PAID IF GREATER. For Reissues, see above			
SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) Frank M. Scuteri III		Registration No. 34,484 Telephone (954) 723-6449	
Signature		Date June 29, 2001	